

MISSISSIPPI DEVELOPMENT AUTHORITY

COMMUNITY SERVICES DIVISION FUNDING CERTIFICATION FORM

Organization: Madison County, MS Fiscal Year End: 9 / 30 / 2014
Month Day Year

- We have exceeded the federal expenditure threshold of \$500,000. We will have our Single Audit or Program Specific Audit completed and will submit by _____, which is no later than nine (9) months after the end of the audited fiscal year.
Audit to be completed by office of State Auditor. Schedule not known.
- We have exceeded the federal expenditure threshold of \$500,000, but did not receive any of these funds through the Community Services Division of the Mississippi Development Authority.
- We did not exceed the \$500,000 federal expenditure threshold required for a Single Audit or a Program Specific Audit to be performed this fiscal year. *(Fill out schedule below)*
- We did not receive any funds from the Community Services Division of the Mississippi Development Authority for this Fiscal Year.

Must be filled out if Single Audit or Program Audit is not required:

Federal Funds				
Federal Grantor	Pass-through Grantor	Program Name & CFDA Number	Contract Number	Expenditures
<i>Total Federal Expenditures for this Fiscal Year</i>				\$ _____

<u>Karl M. Banks</u>	<u>Board President</u>
Authorized Signature (<i>Executive Director, Mayor, Board President</i>)	Printed Name
<u>PO Box 608</u>	<u>Canton, MS</u>
Mailing Address:	City, State
	<u>601-855-5580</u>
	Phone Number
	<u>601-859-5875</u>
	Fax Number
<u>Shelton Vance</u>	<u>601-855-5502</u>
Chief Financial Officer / Comptroller	Phone Number
<u>shelton.vance@madison-co.com</u>	<u>601-859-5875</u>
	Fax Number

Failure to submit this completed form or a completed Single Audit package as described in the audit requirements by the required due date will affect eligibility for future funding.

Submit this form to:
 Mississippi Development Authority, Community Services Division
 Attn.: Compliance Bureau
 P. O. Box 849
 Jackson, Mississippi 39205-0849
 Fax # (601) 359-3108